## STATE OF OREGON

### WATER RESOURCES DEPARTMENT

RECEIPT# 112703

725 Summer St. N.E. Ste. A SALEM, OR 97301-4172

INVOICE # \_\_\_\_

(503) 986-0900 / (503) 986-0904 (fax)						
RECEIVED FF BY:	rom: Max ( Ms J	And A. K	ÚLO .		5-87995	
CASH:	CHECK:# 1079	OTHER: (IDENTIF	FY)	TOTAL NEG D	\$ [[U D.OD	
1083	THE ASURY	470 98		A AGOT		
0407	COPIES				\$	
	OTHER:	(IDENTIFY)			\$	
0243 1/S	Lease 02	44 Muni Water Mgm	nt. Plan	0245 Cons. Water _		
		4270 VIII	Maria .	GARAT		
	MISCELLANEO	us , , (	111			
0407	COPY & TAPE F	EES 46	111		\$	
0410	RESEARCH FE	ES (	1.1		\$	
0408	MISC REVENUE	. ,			\$	
TC162	DEPOSIT LIAB.				\$	
0240	EXTENSION OF	TIME				
	WATER RIGHTS	\$:	EXC.		NECCHO PEE	
0201	SURFACE WAT	ER	\$ 1100	O202	\$	
0203	GROUND WATE	ER .	\$	0204	\$	
0205	TRANSFER		\$			
	WELL CONSTR	UCTION	EXAMP		LEBRIT FEE	
0218	WELL DRILL CO	INSTRUCTOR	\$	0219	\$	
	LANDOWNER'S	PERMIT		0220	\$	
	OTHER	(IDENTIFY)				
	TREAGURY	0437 WE	LL CONST. S	AST FEE		
0211	WELL CONST S	TART FEE	\$	CARE	F.13	
0210	MONITORING V	VELLS	\$	CARC		
	OTHER	(IDENTIFY)				
0607	THEASURY	6467 HYI	HO AGENT	Y LIC NUMBER		
0233		SE FEE (FW/WRD)			<b>\ </b> \$	
0231		SE FEE (FW/WRD)			\$	
	HYDRO APPLIC				\$	
	TREASURY		KOR WEEK			
		<u>VII</u>	HOLDINA .			
_						
	DDE	VENDOR #			•	
DESCRI	IPTION				\$	
DECEIDT:	112703	DATED: 3	4/10/14	W. Chase	nde etc	

Distribution – White Copy - Customer, Yellow Copy - Fiscal, Blue Copy - File, Baff Copy - Fiscal

## E-2

# Standard Application Completeness Checklist Minimum Requirements (OAR 690-310-0040)(ORS 537.400) This is the checklist used by WRD staff

Ap	plication	on <u> </u>	<u> </u>	County	ANE		Priority Date .	7.10.2014
To	wnship	195	Range 1	2W	Section	n <u>3</u>		
An	nount _	0.005 efs	Use _ <b>Do</b>	HESTIC.			18.12	WM Dist. #
Ap	plicant	Name <u>kvo</u>						78.6
Red	ceipt N	No. 112703	<u></u>	Caseworker	Assigned:	☐ Mary	∕ Kim	☐ Jeana
A	Conta	act info: Applicant	/Organizatio	on Name and l	Mailing Ad	ldress		
×		ature (in ink) of <i>all</i> sization or corpora		or the applicar	nt's authori	zed agent (ir	iclude title or	authority if for an
×	Prope	erty ownership: Do	es the appli	cant own all th	he land for	the proposed	d project? _	Y / N
	If	No:						
		The affected lan	downer's na	ame and maili	ng address	must be liste	d	
		A signed statem access to land cr		-				easement permitting itted.
X	For a	SW Application:	Source of v	vater must be	indicated.			
	☐ If the source is stored water, is the stored water component filled out and does the applicant own the reservoir or include a non-expired agreement for stored water? (ORS 537.400)  NOTE: A surface water application cannot be filed at the same time as a Reservoir or Alt Reservoir if it will be for the use of the stored water under the PROPOSED Reservoir application, Exp. Secondary (E2).							
		If for stored wat	er not under	r contract, is th	ne source a	uthorized un	der a permit,	certificate, or decree?
		Permit or Certifi	cate issued	? <u>Y / N</u>		Permit or 6	Certificate#_	
ν/ <sub>ν</sub> □	For a	ı GW Application:	Well Deve	elopment Table	es complete	ed and/or a w	vell log report	included (if existing)
×	Propo	osed water use						
		Amount of wate	dicated					
		If for supplement (Primary and Su	_				nit or certific	ate number listed
Þ	Wate	er Management Se	ction (Estim	ates if the war	ter system l	nas not been	designed)	
À	Reso	ource Protection Se	ction ( <i>N/A f</i>	for Groundwa	ter)			

′/v□	For all standard reservoir applications: Preliminary plans and specifications including dam height, width, crest width and surface area for each reservoir.					
X	Project schedule (If system is already completed, inc	dicate "existing.")				
<b>,\r</b> □	Supplemental data sheets enclosed (if needed)					
•••	☐ Form M (Municipal or Quasi-Municipal)					
	☐ Spring Description Sheet (if source is a spring	ıg)				
×	A completed Land-Use Form or receipt signed and dated by the appropriate planning department officials. Please be certain that the Land-Use form lists all lands involved and all uses proposed. Date of signature must be within the past 12 months.					
×	A <b>Legal Description</b> of all the properties involved where water is diverted, crossed, and used. The Legal description includes a metes and bounds or other government survey description. A copy of the deed, land sales contract or title insurance policy can provide this information, or applicant may submit a lot book report prepared by a title company. Copies of tax bills are not acceptable.					
9	The proposed source <u>IS / IS NOT</u> (circle one) restricted or withdrawn from further appropriation.  NOTE: If it is withdrawn under ORS 538, then return application and fees. If it is withdrawn by other means, accept the application and a negative IR will be issued.					
X	The map must meet all the minimum requirements	of OAR 690-310-0050.				
	Township, Range, Section					
	Location of main canals, ditches, pipelines or flumes (if POA/POD is outside of POU)					
	Place of use, <sup>1</sup> / <sub>4</sub> - <sup>1</sup> / <sub>4</sub> 's and tax lot clearly identified					
	Even map scale not less than $4'' = 1$ mile (1"= 1320 ft.); examples: $1'' = 100$ ft., $1'' = 200$ ft.					
	Location of each diversion point, well or dam by reference to a recognized public land survey corner.					
	Multiple wells shall be uniquely labeled, and identified on well logs if existing.					
	Reference corner on map					
	North Directional Symbol  Number of acres per ¼-¼ if for irrigation, nursery, or agriculture					
	For a standard reservoir application to store		ing a dam height > 10 feet, man			
	must be prepared by a CWRE	2 9.2 dete teet AND have	ing a dam neight $\geq$ 10 feet, map			
,						
Ø	Fees:	Daniela Daniela II.	<b>C</b>			
	Base Fee \$ <u>800</u> 1 <sup>st</sup> CFS or AF \$ <u>300</u>	Permit Recording Fees	\$			
	Addtnl CFS/AF= \$	Mitigation Fee	S			
	Addtnl Use/POD/POA = \$	mingunon rec				
	Addtnl Reservoir= \$	Amount Paid	\$_1100			
	Other = \$ Exam Fee Total \$ 1100	Total Due Amount Returned	\$			
	2, min 100 10min	- mount rotalilou				
Re	viewed by:	Date: 7/10/14				
	V					

Minimum Requirements Checklist
Minimum Requirements (OAR 690-310-0040, OAR 690-310-0050 & ORS 537.140)

# Include this checklist with the application

Check that each of the following items is included. The application will be returned if all required items are not included. If you have questions, please call the Water Rights Customer Service Group at (503) 986-0900.

included. If you have questions, please call the Water Rights Customer Service Group at (503) 986-0900.					
$\mathbf{k}$	SECTION 1: applicant information and signature				
$\mathbf{x}$	SECTION 2: property ownership				
$\mathbf{X}$	SECTION 3: source of water requested	SALEM, OR			
$\mathbf{K}$	SECTION 4: water use				
	SECTION 5: water management	JUL 1 0 2014			
	SECTION 6: resource protection	HECEINED BY OWRD			
	SECTION 7: project schedule				
$\mathbf{x}$	SECTION 8: within a district				
X	SECTION 9: remarks				
	Attachn	nents:			
$\mathbf{k}$	Land Use Information Form with approval and sig	mature (must be an original) or signed receipt			
X	Provide the legal description of: (1) the property from which the water is to be diverted, (2) any property crossed by the proposed ditch, canal or other work, and (3) any property on which the water is to be used as depicted on the map.				
X	Fees - Amount enclosed: \$ \( \frac{1}{1} \) 100 \( \to \) See the Department's Fee Schedule at \( \frac{\text{www.oregon.gov/owrd}}{\text{ov}} \) or call (503) 986-0900.				
Provide a map and check that each of the following items is included:					
$\mathbf{x}$	Permanent quality and drawn in ink				
$\overline{\mathbf{x}}$	Even map scale not less than 4" = 1 mile (example: 1" = 400 ft, 1" = 1320 ft, etc.)				
$\overline{\mathbb{Z}}$	North Directional Symbol				
$\overline{\mathbf{x}}$	Township, Range, Section, Quarter/Quarter, Tax Lots				
	Reference corner on map  Location of each well, and/or dam if applicable, by reference to a recognized public land survey corner (distances north/south and east/west)  Indicate the area of use by Quarter/Quarter and tax lot clearly identified				
X					
X	Number of acres per Quarter/Quarter and hatching supplemental irrigation, or nursery	to indicate area of use if for primary irrigation,			
	Location of main canals, ditches, pipelines or flum	nes (if well is outside of the area of use)			
K	Other:				

WR